

# EXHIBIT A

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF DOCUMENT FILED**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Statement of Conversion

with Document # 20171770760 of  
Nationwide RentSure Rent Protect Association Inc.

Nevada Foreign Corporation

(Entity ID # 20141420610 )

consisting of 3 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/11/2019 that have been posted, and by documents delivered to this office electronically through 09/12/2019 @ 10:17:09.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 09/12/2019 @ 10:17:09 in accordance with applicable law. This certificate is assigned Confirmation Number 11796224.



*Jena Griswold*

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

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Colorado Secretary of State  
 Date and Time: 10/13/2017 03:35 PM  
 ID Number: 20141420610  
 Document number: 20171770760  
 Amount Paid: \$50.00

ABOVE SPACE FOR OFFICE USE ONLY

**Statement of Conversion Converting a Domestic Entity into a Foreign Entity**  
 filed pursuant to § 7-90-201.7 (1) and § 7-90-204.5 of the Colorado Revised Statutes (C.R.S.)

1. For the converting entity, its ID number, entity name, form of entity, jurisdiction under the law of which it is formed, and principal office address are

ID number	<u>20141420610</u> <i>(Colorado Secretary of State ID number)</i>		
Entity name	<u>RentSure Membership Association Inc.</u>		
Form of entity	<u>Corporation</u>		
Jurisdiction	<u>Colorado</u>		
Principal office street address	<u>5445 DTC Parkway</u> <i>(Street number and name)</i>		
	<u>Penthouse 4</u>		
	<u>Greenwood Village</u> <i>(City)</i>	<u>CO</u> <i>(State)</i>	<u>80111</u> <i>(ZIP/Postal Code)</i>
	<u></u> <i>(Province – if applicable)</i>	<u>United States</u> <i>(Country)</i>	
Principal office mailing address (leave blank if same as street address)	<u></u> <i>(Street number and name or Post Office Box information)</i>		
	<u></u> <i>(City)</i>	<u></u> <i>(State)</i>	<u></u> <i>(ZIP/Postal Code)</i>
	<u></u> <i>(Province – if applicable)</i>	<u></u> <i>(Country)</i>	

2. For the resulting entity, its true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

True name	<u>Nationwide RentSure Rent Protect Association Inc.</u>		
Form of entity	<u>Foreign Corporation</u>		
Jurisdiction	<u>Nevada</u>		
Street address	<u>9205 W. Russell Rd</u> <i>(Street number and name)</i>		
	<u>Building 3, Suite 240</u>		
	<u>Las Vegas</u> <i>(City)</i>	<u>NV</u> <i>(State)</i>	<u>89148</u> <i>(ZIP/Postal Code)</i>
	<u></u> <i>(Province – if applicable)</i>	<u></u> <i>(Country)</i>	

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province – if applicable)

(Country)

3. The converting entity has been converted into the resulting entity pursuant to section 7-90-201.7, C.R.S.

4. (Mark the applicable box and complete the statement. Caution: Mark only one box.)

- ☒ The resulting foreign entity does not maintain a registered agent in this state and service of process may be addressed to the entity and mailed to the principal address pursuant to section 7-90-704 (2), C.R.S.

or

- ☐ The resulting foreign entity maintains a registered agent to accept service pursuant to section 7-90-204.5, C.R.S. The person appointed as registered agent has consented to being so appointed. Such registered agent's name and address are

Name

(if an individual)

(Last)

(First)

(Middle)

(Suffix)

or

(if an entity)

(Caution: Do not provide both an individual and an entity name.)

Street address

(Street number and name)

(City)

CO  
(State)

(ZIP Code)

Mailing address

(leave blank, if same as street address)

(Street number and name or Post Office Box information)

(City)

CO  
(State)

(ZIP Code)

5. (If applicable, adopt the following statement by marking the box and include an attachment.)

- ☐ This document contains additional information as provided by law.

6. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are

(mm/dd/yyyy hour:minute am/pm)

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7. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Chesebro</u>	<u>Barbara</u>	<u>E.</u>	
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>Brownstein Hyatt Farber Schreck LLP</u>			
<small>(Street number and name or Post Office Box information)</small>			
<u>410 17th Street, Suite 2200</u>			
<u>Denver</u>	<u>CO</u>	<u>80202</u>	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
<u></u>	<u></u>	<u></u>	
<small>(Province – if applicable)</small>	<small>(Country)</small>		

*(If applicable, adopt the following statement by marking the box and include an attachment.)*

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